

SINGAPORE MEDICAL COUNCIL CATEGORY 3B CME PROGRAMME (Code SMJ 201603B)

Question 1. Hemiballism and hemichorea have been associated with lesions in the following locations:

- (a) Thalamus.
- (b) Brainstem.
- (c) Cerebral cortex.
- (d) Cerebellum.

True	False
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Question 2. The following can cause a T1 hyperintense appearance of the basal ganglia on magnetic resonance (MR) imaging:

- (a) Hyperacute blood.
- (b) Carbon monoxide poisoning.
- (c) Physiological calcification.
- (d) Manganese deposition.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Question 3. Regarding Fahr's disease:

- (a) Fahr's disease is solely transmitted as an autosomal dominant condition.
- (b) It is characterised by the deposition of copper in areas of the brain.
- (c) There is absence of an infectious, traumatic or toxic cause.
- (d) Patients may present with speech disturbances or dementia.

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<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Question 4. Regarding metal deposition:

- (a) Copper and manganese are excreted via the hepatobiliary system.
- (b) Iron and manganese accumulate in the globus pallidus in patients with chronic liver disease.
- (c) Manganese has paramagnetic properties that can cause pallidal T1 hyperintensity.
- (d) Copper does not cause any signal change on MR imaging.

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Question 5. Regarding the prognosis and management of nonketotic hyperglycaemic chorea-hemiballismus:

- (a) This condition is treatable.
- (b) The sequential neuroimaging findings correlate with the clinical course.
- (c) Resolution of imaging findings does not lag behind the patient's clinical recovery.
- (d) Patients who present with chorea-hemiballismus have a poor prognosis.

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
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Doctor's particulars:

Name in full : _____
 MCR number : _____ Specialty: _____
 Email address : _____

SUBMISSION INSTRUCTIONS:

(1) Log on at the SMJ website: <http://www.sma.org.sg/publications/smjcurrentissue.aspx> and select the appropriate set of questions. (2) Provide your name, email address and MCR number. (3) Select your answers and click "Submit".

RESULTS:

(1) Answers will be published in the SMJ May 2016 issue. (2) The MCR numbers of successful candidates will be posted online at the SMJ website by 3 May 2016. (3) Passing mark is 60%. No mark will be deducted for incorrect answers. (4) The SMJ editorial office will submit the list of successful candidates to the Singapore Medical Council. (5) One CME point is awarded for successful candidates.

Deadline for submission: (March 2016 SMJ 3B CME programme): 12 noon, 25 April 2016.